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**MULTIPLE CLAIM IDENT CLAIM
 FEE CALCULATION SHEET
 (FOR USE WITH FORM PTO-375)**

SERIAL NO. 09-807011 FILING DATE _____
 APPLICANT _____

CLAIMS

	AS FILED		AFTER 1st AMENDMENT		AFTER 2nd AMENDMENT									
	IND.	DEP.	IND.	DEP.	IND.	DEP.		IND.	DEP.	IND.	DEP.	IND.	DEP.	
1	1		1		1		51							
2		1		1		1	52							
3		1		2		1	53							
4		1		2		1	54							
5	1			2		1	55							
6		1		2		1	56							
7		1		1		1	57							
8		3		1		1	58							
9		1		1		1	59							
10		1					60							
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47							97							
48							98							
49							99							
50							100							
TOTAL IND.			1		1		TOTAL IND.							
TOTAL DEP.				12		8	TOTAL DEP.							
TOTAL CLAIMS			13		9		TOTAL CLAIMS							

PTO-1350 (3-75)

MAY BE USED FOR ADDITIONAL CLAIMS OR AMENDMENTS

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